U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 44437	2. Fiscal Year Covered From:	
·	T/T/04 Through: $12/31/04$	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Doug Conn	Name Swanson Employees Independent Union	
	Labor Organization File Number 590373	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 2682 Stewartstown Road	Street 2682 Stewartstown Road	
City Morgantown	City Morgantown	
State WV : ZIP Code + 4 26508	State WV ZIP Code + 4 26508	
5. Position in labor organization. Officer		
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Amount	
Street	7.b. Amount	
City		
State ZIP Code + 4		
Signature		
15. Signature and verification. The undersigned deciares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed ONLING M COMA		

Name of Person Filing Doug Conn		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).  Name			
Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	a. Labor Organiza	tion	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing	1g.	
Name Trade Name, if any:  P.O. Box, Bldg., Room No., if any Street  City  State  ZIP Code + 4	11.b. Approximate dollar value 12.a. Nature of interest held		
	12.b. Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Jubelirer, Pass & Intrieri, P.C.	valued at \$50	t of food and beverage .00 from law firm who	
Trade Name, if any:	represents Sw Union.	anson Employees Independent	
P.O. Box, Bldg., Room No., if any	onzon.	; ; ;	
Street 219 Fort Pitt Boulevard		4	
City Pittsburgh			
State PA ZIP Code + 4 15222			
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	\$50.00	